



# Application for Certificate of Title for a Motor Vehicle

Office Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 846-6000 Fax (406) 846-6039 • [mvdtitleinfo@mt.gov](mailto:mvdtitleinfo@mt.gov)

**Fees:** \$12 for light vehicles, trucks and buses weighing less than one ton; \$10 for all other vehicles. Additional fees and taxes will be due upon registration.

**Title Number:**

<b>A</b>	<b>Applicant Section</b>	Applicant's Name (first, middle, last) or Firm Name:				Driver's License Number:	
		Co-Applicant's Name (first, middle, last):				Driver's License Number:	
		Mailing Address:		City:	State:	Zip Code:	County:
		Residential Address:		City:	State:	Zip Code:	County:
<b>B</b>	<b>Vehicle Section</b>	Manufacturer's Suggested Retail Price: \$		Year:	Make:	Model:	
		Style:		Vehicle Identification Number:	Color:	Fuel Type:	Unladen Weight: <input type="checkbox"/> Under 2850 lbs <input type="checkbox"/> 2850 lbs & over
		Trucks One Ton and Under: <input type="checkbox"/> 1/4 ton <input type="checkbox"/> 1/2 ton <input type="checkbox"/> 3/4 ton <input type="checkbox"/> 1 ton	Trucks Over One Ton: Manufacturer's Rated Capacity: _____	Travel Trailer and Camper: Length: _____	Motorcycle and Quadricycle: Wheel Base: _____ Wheel Diameter: _____	<input type="checkbox"/> Street rod <input type="checkbox"/> Kit vehicle <input type="checkbox"/> Custom vehicle <input type="checkbox"/> Specially constructed vehicle	
<b>C</b>	<b>Is there a security interest or lien against this vehicle?</b>	<input type="checkbox"/> No		<input type="checkbox"/> Yes -- complete this section and submit a filing fee of \$8 for each security interest or lien			
		Date of First Security Interest or Lien: _____		Amount: \$ _____	Name of First Secured Party or Lienholder:		
		Mailing Address of First Secured Party or Lienholder:				City:	State: Zip Code:
		Date of Second Security Interest or Lien: _____		Amount: \$ _____	Name of Second Secured Party or Lienholder:		
		Mailing Address of Second Secured Party or Lienholder:				City:	State: Zip Code:
<b>D</b>	<b>Odometer/Statement of Sale Section</b>	I certify under penalty of law (Section 45-7-203, MCA, Unsworn Falsification to Authorities) that:					
		<ul style="list-style-type: none"><li>The vehicle described above was sold to the applicant named in Section A.</li><li>The (check one) 5 <input type="checkbox"/> or 6 <input type="checkbox"/> digit odometer now reads (no tenths) _____ miles; date read _____ and, to the best of my knowledge, it reflects the actual mileage <i>unless one of the following statements is checked:</i> <div><b>DO NOT CHECK UNLESS APPLICABLE</b></div><input type="checkbox"/> The odometer reading reflects the amount of mileage <i>in excess of its mechanical limits</i> <input type="checkbox"/> The odometer reading is not the actual mileage. <i>Warning – odometer discrepancy.</i></li><li>If signing for a commercial entity, I have full authority to do so.</li></ul>					
		Dated this _____ day of _____ 20 _____		Dealer's License Number _____	Signature of Dealer's Agent – this is my legal signature _____		
		Dealer's Firm Name _____		Printed Name of Dealer's Agent _____			
<b>E</b>	<b>Applicant's Acknowledgement</b>	I certify under penalty of law (Section 45-7-203, MCA, Unsworn Falsification to Authorities) that:					
		<ul style="list-style-type: none"><li>I am one of the applicants named in Section A;</li><li>I am aware of the odometer certification made in Section D;</li><li>The statements made and information contained on this form are true and correct to the best of my knowledge, information and belief and, if signing for a commercial entity, I have full authority to do so.</li></ul>					
		Dated this _____ day of _____ 20 _____		Signature -- this is my legal signature (only one signature is required) _____			
		If Applicant is a Commercial Entity, Give Full Name _____		Printed Name of Applicant _____			